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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY		Attorney Do	cket Number	ORT-1482		
		First Named	Inventor	GRANT, Elfrid	a R. et al.	
	FOR UTILITY OR DESIGN		COMPLETE IF KNOWN			
	APPLICATION CFR 1.63)	Application N	Number	TBD	·	
Declaration Submitted with Initial Filing	OR Initial Filing (Su	ırcharge	Filing Date		August 6, 200	1
	(37 CFR 1.16(e)		Group Art U	nit		
			Examiner Na	ame		
As a below named inventor	r, I hereby declare tha	t:				
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
4-PYRIMIDINAMINE DERIVATIVES, PHARMACEUTICAL COMPOSITIONS AND RELATED METHODS (Title of the Invention)						
the specification of which						
is attached hereto						
OR						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application	Country		Filing Date D/YYYY)	Priority Not Claime	d At	ified Copy tached?
Number(s)					YES	NO
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

DECLARATION - Utility or Design Patent Application					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)	Filing Date (MM/DD/YYYY)				
60/223,791	August 8, 2000	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			
as the subject matter of each of the claims provided by the first paragraph of Title 35, Udefined in Title 37, Code of Federal Regula national or PCT international filing date of the		United States application in the manner eduty to disclose material information as filing date of the prior application and the			
Application Serial No.	Filing Date	Status			
		Patented Patented Patented			
I hereby appoint:					
Place Customer  Number Bar Code  Label Here					
Practitioner(s) named below:  Name  Registration Number					
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Address all telephone calls to Myra H. McCormack at telephone number (732) 524-6932.					
Customer Number  Direct all correspondence to:					
Name:					
Address:					
Address:					
City:	State:	ZIP			
Country	Telephone:	Fax:			

information and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and further te so made are puni	that these sta shable by fine	tements were a or imprisonme	made with the knowledge ent, or both, under 18	
NAME OF SOLE OR FIRST INVENTOR:	A pe	tition has been fil	ed for this unsigne	ed inventor	
Given Name (first and middle [if any]) Elfrida R.		Family Name or Surname	GRANT		
Inventor's Signature			Date		
Residence: City Flemington	State NJ	Count	ry USA	Citizenship USA	
Mailing Address 9 Lake Court					
City Flemington	State NJ	ZIP 0	Contract of the Contract of th	Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SECOND INVENTOR:	☐ A pe	tition has been fil	ed for this unsigne	ed inventor	
Given Name (first and middle [if any]) Frank K.		Family Name or Surname	BROWN		
Inventor's Signature			Date		
Residence: City Whitehouse Station	State NJ	Count	ry USA	<b>Citizenship</b> USA	
Mailing Address 12 Clubhouse Drive					
City Whitehouse Station	State NJ	ZIP 0		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF THIRD INVENTOR:	☐ A pe	tition has been fil	ed for this unsigne	ed inventor	
Given Name (first and middle [if any]) Robert Allan		Family Name or Surname	ZIVIN		
Inventor's Signature			Date		
Residence: City Skillman	State NJ	Count	try USA	Citizenship USA	
Mailing Address 9 Pebble Beach Court					
City Skillman	State NJ	ZIP 0	8558	Country USA	

information and belief are believed to be that willful false statements and the like U.S.C. 1001 and that such willful false issued thereon.	e true; and further so made are pun	that these sta	atements were e or imprisonm	made with the knowledge ent, or both, under 18	
NAME OF FOURTH INVENTOR:	A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Michael		Family Name or Surname	McMILLAN		
Inventor's Signature	<del></del>	<del></del>	Date	T	
Residence: City Somerville	State NJ	Coun	try USA	<b>Citizenship</b> USA	
Mailing Address 70 Brookside Avenue, Apt. 3	BA	,			
City Somerville	State NJ	ZIP (		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF FIFTH INVENTOR:	A pe	tition has been fi	iled for this unsign	ed inventor	
Given Name (first and middle [if any]) Zhong		Family Name or Surname	ZHONG		
Inventor's Signature			Date		
Residence: City Bridgewater	State NJ	Coun	try USA	Citizenship People's Republic of China	
Mailing Address 31 Whitehead Road					
City Bridgewater	State NJ	ZIP (	08807	Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SIXTH INVENTOR:	☐ A pe	etition has been fi	iled for this unsign	ed inventor	
Given Name (first and middle [if any]) Malcolm Family Name or Surname			SCOTT		
Inventor's Signature			Date		
Residence: City Telford	State PA	Coun	try USA	Citizenship USA	
Mailing Address 850 Keller Creamery Road					
City Telford	State PA	ZIP	18969	Country USA	



I hereby declare that all statements mainformation and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and furthe e so made are pur	r that these sta nishable by fine	tements were i or imprisonme	made with the knowledge ent, or both, under 18	
NAME OF SEVENTH INVENTOR:	□Ар	etition has been fil	led for this unsigne	ed inventor	
Given Name (first and middle [if any]) Allen B.		Family Name or Surname	REITZ		
Inventor's Signature	<del></del>	<del>  </del>	Date		
Residence: City Lansdale	State PA	Count	try USA	Citizenship USA	
Mailing Address 109 Greenbriar Road					
City Lansdale	State PA	ZIP 1		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF EIGHTH INVENTOR:	□Ар	etition has been fi	led for this unsigne	ed inventor	
Given Name (first and middle [if any]) Tina Morgan		Family Name or Surname	ROSS		
Inventor's Signature			Date		
Residence: City Audubon	State PA	Count	t <b>ry</b> USA	CitizenshipUSA	
Mailing Address 11 Culp Road					
City Audubon	State PA	ZIP 1	9403	Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF NINTH INVENTOR:	A p	etition has been fi	led for this unsigne	ed inventor	
Given Name (first and middle [if any])		Family Name or Surname	-		
Inventor's Signature			Date		
Residence: City	State	Count	try	Citizenship	
Mailing Address					
City	State	ZIP		Country	